									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOR Effective January 1, 2003									06005-/37297					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	EN	miY □	OR	OTHER SMALL		
TOTAL CLAIMS			34					RATE		FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	375.00	OR	Basic Fee	750.00	
TOTAL CHARGEABLE CLAIMS			34 minus 20=		• 14			X\$ 9:	-		OR	X\$18≃	252	
INDEPENDENT CLAIMS			f minus 3 =		1			X42=			OR	X84=	84	
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT					+140=			OR	+280=		
• #	the difference	in column 1 is l	ess than zero, enter "0" in column 2				TOTA	_		OR	TOTAL	1086		
CLAIMS AS AMENDED - PART II												OTHER		
(Column 1) (Column 2) (Column 3)								SMAL	TE	NTITY	OR	SMALL		
AMENDMENT A	10/12/05	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVK PAID	BER	PRESENT EXTRA		RATE	≣	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 24	Minus	** 5	34			X\$-0	e		OR	XSAS-	1	
	Independent	• 5	Minus	400	4	- 1		X42=			OR	X94a	200	
L	FIRST PRESE	NTATION OF ML	JLTIPLE DEF	ENDEN	CLAIM			+140			OR	+280=		
								101	AL.		OR	TOTAL	200	
(Column 1) (Column 2) (Column 3)									ee <b>i</b>	-,·- <del>_,</del> -		ADDIT. FEE		
	- 6	CLAIMS		HIGH	EST		ו		7	ADDI-			ADDI-	
AMENDMENT B	2-21-4	REMAINING AFTER AMENDMENT	and Marie Consequent	PREVI	BER OUSLY* FOR	PRESENT		RATE		TIONAL FEE		RATE	TIONAL	
	Total	. 17	Minus	* 7	:4	. 0		X\$ 9:	-		OR	X\$18=	0	
	Independent	• 4	Minus	***	4	<u>- 0</u>		X42=		0	OR	X84=	0	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT							+140:		Ŏ	OR	+280=	0	
	17	1123						TOT		0	OR	YOTAL ADDIT. FEE	0	
(Column 1) (Column 2) (Column 3)														
O		CLAIMS REMAINING		HIGH		PRESENT			7	ADDI-			ADDI-	
AMENDMENT C		AFTER AMENDMENT		PREVI	OUSLY	EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	**				X\$ 9			OR	X\$18=		
	Independent	•	Minus	***		•		X42=			OR	X84=		
L	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	PENDEN	T CLAIM		J							
* If the entry in column 1 is less than the entry in column 2, write '0' in column 3.											OR	+280=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE											OR	ADDIT, FEE		
	The "Highest Nun	ther Previously Pa	id For" (Total o	r Independ	it ei (Inei	e highest numb	er fo	und in the	ebt	propriate bo	x In co	iumn 1.		